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Bib Data Sheet

CONFIRMATION NO. 5019

SERIAL NUMBER 10/762,630	FILING DATE 01/20/2004 RULE	CLASS 297	GROUP ART UNIT 3636	ATTORNEY DOCKET NO. JHNSF.028CP1
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/219,987 08/14/2002
and claims benefit of 60/451,232 02/28/2003

** FOREIGN APPLICATIONS *****

NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 04/27/2004

** SMALL ENTITY **

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Initials				

ADDRESS

20995
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TITLE

Headrest-mounted monitor

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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